

State of California — The Resources Agency
DEPARTMENT OF PARKS AND RECREATION

ORGANIZED GROUP RESERVATION FOR DAY USE

This form must be submitted in duplicate to the park you are planning to visit.
The second copy, when endorsed by the Ranger, will be returned to you and will
serve as your record of the reservation.

Group Representative will complete the following, where applicable:

Park Unit _____ Arrive by Auto _____ Bus _____
Proposed Date of Visit _____ Name of School or Group _____
Alternate Date _____
Time of Visit _____ Address _____
Alternate Time _____
Age/Grade of Children _____ Person in Charge _____
No. of Children _____ Adults _____ Phone _____

It is understood that full compliance with the Rules and Regulations of the California State Park System is expected during our visit. I will be responsible for the activities of the group, the proper use and cleanup of the facilities provided, and will personally supervise the group while we are in this unit of the State Park System. I understand that an inspection of the site used will be made prior to our departure.

Group Leader's Name (Print or Type)

Signature

Address

Phone Number

FOR PARK USE ONLY

☐ We are pleased to confirm your planned group visit for _____ at _____
Date Time

☐ We regret that the time you requested for a group visit is not available.

COMMENTS